

FFT WINTER SERIES 2004



Race 1 - Stonehaven Novice Triathlon ~ 29/02/04
3 mile run; 8 mile cycle; 400m swim

Race 2 - Stonehaven Novice Triathlon ~ 28/03/04
3 mile run; 8 mile cycle; 400m swim

Race 3 - Aboyne Ranking Duathlon ~ 25/04/04
5K run; 30K cycle; 5K run

www.fleet-feet.com

The Fleet Feet Triathletes Winter Series" is open to all athletes of all fitness levels and abilities. Novice athletes who wish to try out the sport for the first time are particularly welcome for all 3 races. The swims will be held indoors and take place after the run and cycle stages. Cycle helmets are compulsory. Race maps and other details will be sent out upon receipt of entry form. Registration is 10:00, with 11:00 start for each race. Check website for late breaking news and results.

Entry Fees Normal Entry closes the Monday midnight prior to each race. £3.00 surcharge fee for late entries

	Junior (16-19 yrs inclusive)	Senior STA / BTA Member	Senior Non Member
Race 1 Only	£4	£8	£10
Race 2 Only	£4	£8	£10
Race 3 Only	£4	£8	£13
All 3 Races on 1 form	£10	£20	£29

There will be a surcharge of £3 for entries received after each Monday night.

Entries to: Gary Gutteridge, 46 Bernham Avenue, Stonehaven, Scotland, AB39 2WD
E-Mail: ggutteridge@oceanering.com Telephone: (W) 01224 797207 (H) 01569 765234

Cheques Payable to 'FFT' : Please send two 9" x 6" SAE'S for race instructions and results

NOTE -- No SAE's required if email address included, as all instructions will be sent electronically
Please note details & results will be posted on www.fleet-feet.com and emailed to everyone providing a legible email address.

Entry Form

Events (please tick)

RACE 1	RACE 2	RACE 3	All 3 RACES	Fee Paid £

Please complete all boxes as accurately as possible. (minutes & seconds)

Run time (3 miles)	Cycle time (8 miles)	Swim time (400m)

CATEGORY – PLEASE TICK BOXES

MALE	FEMALE	JUNIOR 16-19 yrs	Senior 20-39 yrs	Veteran 40-49 yrs	Supervet 50-59 yrs	Vintage 60+yrs

Name: _____ Date of Birth: _____

Address: _____

Post Code: _____

Club: _____ STA/BTA/ No.: _____

Email Address: .. _____

(PLEASE PRINT VERY CLEARLY)

Day Tel No: _____ Eve Tel No: _____ Mob No: _____

DECLARATION: I am medically fit to run in the above race and understand that I enter at my own risk, and the organisers will be in no way responsible for any injury, loss or illness incurred to my person during or as a result of the event or for any loss of property. I have no objection to the information contained on this application being entered on a computer for the purpose of race administration only.

Signed: _____